

OBITUARY

Iqbal Haroon Master, 5 December 1962 - 15 January 2021



It was with overwhelming sadness that we heard of the sudden passing of our colleague and friend Dr Iqbal Haroon Master on 15 January 2021 due to complications following SARS-CoV-2 infection. A great TB hero has passed. In writing this, we wish to pay tribute and bring visibility to Dr Master's legacy in the fight against TB and inspire other healthcare workers to take up this torch.

Dr Master was born on 5 December 1962. He graduated from the University of Natal as a medical doctor (MB ChB) in 1986. After completing his internship at King Edward VIII Hospital, Durban, and working briefly in obstetrics and paediatrics, he started as a medical officer in 1994 at King Dinuzulu Hospital Complex (KDHC), Durban, prior to the Tugela Ferry outbreak of extensively drug-resistant TB, which claimed the lives of nearly all who contracted it. This deadly infectious disease outbreak, which would have frightened away most frontline health workers, marked the start of Dr Master's lifelong dedication to fighting drug-resistant TB (DR-TB). Dr Master committed 27 years of his life to treating patients with TB, HIV and DR-TB, making him one of the most experienced and knowledgeable clinicians in the field.

In 2007, Dr Master took on the role as chief medical officer and clinical manager at KDHC. From there, he played a critical role in co-ordinating the provision of clinical DR-TB services and DR-TB training throughout the province. He was a principal member of the eThekweni District and Provincial DR-TB task team and a driving force behind the decentralisation of DR-TB services in KwaZulu-Natal Province.

Dr Master was a great and humble mentor, providing guidance on DR-TB clinical care to junior doctors and nurses provincially and nationally. He played a frontline role developing and piloting training modules for DR-TB and worked closely with pharmacists to implement active drug safety monitoring. His knowledge and experiences regarding DR-TB were recognised internationally and he was an invited keynote speaker at a number of international scientific meetings. Dr Master took an active research role as an investigator in several important TB studies; he co-authored 44 peer-reviewed publications, including some landmark DR-TB articles.

He served on the National Clinical Advisory Committee to the South African (SA) National DR-TB directorate since the time of its inception. He brought his extensive clinical expertise to this committee and his passion for improving the treatment for persons with DR-TB. His contributions played a key role in the development of national DR-TB policy and implementation, including facilitating access to lifesaving new and repurposed TB drugs (bedaquiline, delamanid, linezolid and clofazimine) to persons with DR-TB.

Through his dedicated work as a clinician and co-ordinator of the KDHC site for the Bedaquiline and Delamanid Clinical Access Programmes (BCAP and DCAP), Dr Master facilitated access to these drugs to the largest cohort of patients with DR-TB nationally, as well as one of the largest cohorts globally. With the belief that no one should be left behind, Dr Master was a great advocate for children with DR-TB, working tirelessly to secure DR-TB paediatric formulations.

The commitment, contributions and advocacy of Dr Master regarding new and repurposed DR-TB drugs through these various platforms ultimately contributed to the change in, first, the SA National DR-TB guideline and, subsequently, the 2018 World Health Organization (WHO) treatment guidance for DR-TB. He served as a member of the WHO DR-TB Guidelines Development Group in 2020 and contributed to the debate that culminated in the adoption of a 'Short All-Oral MDR-TB treatment' for all national TB programmes globally. This change in treatment is one of the greatest milestones towards the goal of offering people with DR-TB a treatment regimen that is safe and effective.

Dr Master, with his gentle spirit, infectious smile and sense of humour, humility,

clinical knowledge, hardworking ethic and unstoppable passion for persons suffering from TB, will be missed by his colleagues, patients and the TB community at large. However, Dr Master's legacy will live on and we, his colleagues, commit ourselves to live out his legacy by continuing the fight against DR-TB. In Dr Master's words, 'Our job is to do more than administer [TB] drugs; it is to restore hope ... during their darkest hours'.

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